								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10/723, 787					
CLAIMS AS FILED - PART I													
(Column 1) (Column 2)							TYPE	SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS 43							RAT	E	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			니 3minus 20=		* 23		X\$ 9=			OR	X\$18=	414	
INDEPENDENT CLAIMS				nus 3 =			X43=			OR	X86=	86	
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT	ESENT				+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	٦L		OR	TOTAL	1,270	
CLAIMS AS AMENDED - PART II							SMA	115	ENTITY	°OB	OTHER SMALL I		
_		(Column 1) CLAIMS		(Colun		(Column 3)			ADDI-	1		ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	USLY	PRESENT EXTRA	RAT	Ε	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		-	X43:	=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_		OR	+290=		
1, 20,24,43							TO1	ΓAL			TOTAL		
	(Column 1) (Column 2) (Column 3)							EE			ADDIT. FEE		
AMENDMENT B		CLAIMS		HIGH		(00/4/11/10/		T	ADDI-	1		ADDI-	
		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	USLY	PRESENT EXTRA	RATE	=	TIONAL FEE		RATE	TIONAL	
	Total ·	+	Minus	++	011	_	X\$ 9:		1		X\$18=	1. L.L.	
	Independent	*	Minus	***		=	X43=	\dashv		OR			
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_		OR	X86=		
•	<u> </u>			,			+145: TOT			OR	+290=		
										OR	TOTAL ADDIT. FEE		
	_	(Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	X\$ 9=		-	OR	X\$18=		
	Independent	*	Minus	***		=	X43=	1			X86=		
【	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\dashv		OR			
+145=										OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE		
	If the "Highest Nu The "Highest Num	mber Previously Pa ber Previously Pai	aid For" IN THI d For" (Total or	S SPACE is Independe	less tha ent) is the	n 3, enter "3." highest number			ropriate box				